

# **2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N00000005043

**FILED**  
**Dec 08, 2010**  
**Secretary of State**

**Entity Name:** 57TH AVENUE INC.

**Current Principal Place of Business:**

5577 AVENUE  
JACKSONVILLE, FL 32209

**New Principal Place of Business:**

**Current Mailing Address:**

8523 LAURENS RD  
JACKSONVILLE, FL 32208

**New Mailing Address:**

**FEI Number:** 43-1958981

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WARD, CHERON O  
5560 OLIVER ST S  
JACKSONVILLE, FL 32211 US

**Name and Address of New Registered Agent:**

DAVIS, CHERON O  
8167 OLD KINGS ROAD #18  
JACKSONVILLE, FL 32219 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CHERON DAVIS

12/08/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: WARD, GEORGE W  
Address: 8523 LAURENS ROAD  
City-St-Zip: JACKSONVILLE, FL 32208

Title: D  
Name: WARD, FAYE H  
Address: 8523 LAURENS RD  
City-St-Zip: JACKSONVILLE, FL 32208

Title: D  
Name: WARD, CHERON O  
Address: 8167 OLD KINGS ROAD  
City-St-Zip: JACKSONVILLE, FL 32219

Title: D  
Name: DAVIS, FRANKIE L  
Address: 8167 OLD KINGS ROAD  
City-St-Zip: JACKSONVILLE, FL 32219

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FAYE H WARD

DIR

12/08/2010

Electronic Signature of Signing Officer or Director

Date